PTC/68/06 (12-04)
Approved for use through 7/31/2006, OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

| PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875 |  |                             |   |                  |                 |                  |                            |                               | Application or Docket Number |                                  |  |
|--|--|-----------------------------|---|------------------|-----------------|------------------|----------------------------|-------------------------------|------------------------------|----------------------------------|--|
| APPLICATION AS FILED (Column 1)  |  |                             | ) - PART (<br>(Column 2)                |                  | _               | 8MALL ENTITY     |                            | OR.                           | OR OTHER THAN                |                                  |  |
| FOR  | NUN                                      | ABER FILED                  | _ NUI                                   | ABER EXTRA       |                 | RATE (\$)        | FEE (\$)                   | 7                             | - RATE (S)                   | FEE                              |  |
| BASIC FEE .<br>(37 OFR 1.16(0), (b),                                     | or (d)                                   |                             |   |                  | 7               |                  | 4 - 4 - 7 AV               | 7                             | MILLIA                       | (EE)                             |  |
| BEARCH FEE   |  | <del>- ' </del>             | -                                       |                  | 1               |                  | <b>`</b>                   | 1                             |                              | -                                |  |
| DY OFR 1.18(A) (B) (EXAMINATION FE                                       |  | <del></del>                 |   |                  | -               |                  |                            | 4                             |                              |                                  |  |
| (37 OFR 1.16(c), (p),  |  |                             | <u> </u>                                | ·                | ]               |                  |                            | _                             |                              | 1                                |  |
| TOTAL CLAIMS<br>(97 OFR 1.16(V)  |  | minus 20 #                  | · .                                     | •                |                 | ×25.             |                            | OR                            | 30.                          |                                  |  |
| INDEPENDENT CO   | AMS                                      | minus 3 =                   | 1.                                      |                  | 1               | ×100             | <del></del>                | 1 "                           | 200                          | .                                |  |
| Di ark i.iupgi   | If the sp                                | ecification an              | d drawing                               | exceed 100       | 1               | ×100             |                            | - }                           | xacc                         | 4                                |  |
| APPLICATION SIZ  | r i sheets c                             | f paper, the (\$125 for ema | unnicotion.                             | stra faa dus     |                 |                  |                            |                               | 1                            |                                  |  |
| (37 CFR 1.10(p))   | # edd#dbp                                | \$1:00 HINES                | H-hacklon!                              | Fight Persons    | . <sub>Pd</sub> | nachabite Br     | edbackbackb                | ्र १९ स्टब्स्<br>- १९ स्टब्स् | Money Grant Billion          | .  <br><del> }}</del> ••#••#•••• |  |
| <del></del>  | 35 U.8.C                                 | c. 41(a)(1)(G)              | and 97 C                                | FR 1.16(e).      | 1               |                  | · .                        | 1                             |                              | 1                                |  |
| MULTIPLE-DEPENDENT CLAIM PRESENT (37 OFR 1.18(II))                       |  |                             | ŀ                                       | 180              |                 |                  | 360                        |                               |                              |                                  |  |
| If the difference in   | column 1 is less th                      | an zem erter                | Of to eather                            |                  |                 |                  |                            |                               |                              |                                  |  |
| •  |  | •                           |   |                  |                 | TOTAL [          | <del></del>                | <b>j</b> .                    | TOTAL                        | L                                |  |
| APP  | NCATIÓN 48                               | AMENDED                     | - PART I                                | 1."              |                 | •                |                            |                               |                              | •                                |  |
|  | (Column 1)                               |                             | (Column 2)                              | (Column 3)       |                 | SMALL E          | NTITY                      | OR                            | . OTHER                      | THAN<br>ENTITY                   |  |
| ا اسلماء   | CLAIMS<br>REMAINING                      |                             | HIGHEST<br>HUMBER                       | PRESENT          | <b> </b>        |                  |                            | ]                             |                              |                                  |  |
| Elenial oc   | AFTER<br>AMENDMENT                       | I PR                        | EVIOUSLY<br>ALD FOR                     | EXTRA            |                 | RATE (6)         | ADOI-<br>TIONAL<br>FEE (1) |                               | RATE (\$)                    | ADOL                             |  |
| Total  | 17                                       |                             | 300                                     | -                | lŀ              | 75               | FEB (8)                    |                               | 1200                         | FEE (S)                          |  |
| Total (II or ork 1.1eg)) Independent (II or ork 1.1eg) Application Sta   |  | Minus ***                   | 4                                       | - 1              |                 | × do             |                            | ok                            | 450.                         | 0 (200                           |  |
| Application Sta  | 9 Fee (97 CFR 1.1)                       | 8(e))                       |   | 1                | -               | × CC             |                            | OR                            | SCIU-                        | don                              |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (87 CFR 1.16(0))          |  |                             |   |                  | 180             |                  |                            | 360                           |                              |                                  |  |
|  | 11. 12                                   |                             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                  | Ŀ               | TOTAL            |                            | OR                            | TOTAL                        |                                  |  |
| , , ,  | ,  |                             |   |                  |                 | ADD'L FEE        | · ,                        | OR                            | ADD'LFEE                     | 200.                             |  |
|  | (Column 1)                               |                             | Column 2)                               | (Column 3)       | _               |                  |                            |                               |                              | Pd.                              |  |
| 0  | REMAINING                                |                             | KOHEST<br>UMBER                         | PRESENT          | Γ               | RATE (1)         | ADDI-                      |                               | RATE (S)                     | ADDI-                            |  |
|  | AFTER<br>AMENDMENT                       | PRE                         | VIOUSLY<br>AID FOR                      | EXTRA            | 1               | ANICIAL.         | TIONAL                     |                               | 10415 (4)                    | TIONAL                           |  |
| Total (27 OFR 1.140)   | , 3 V                                    | Minus **                    | 17                                      | -                | +               | 38               | FEE.(I)                    |                               | VA.                          | . FEE (1)                        |  |
| Independent<br>(27 CFR 1.160,1)  | $\frac{2}{2}$                            | Minus                       | \ <u></u>                               |                  | 12              | <u> </u>         |                            | OR .                          | ×5U.                         | •                                |  |
| J  | <u>J</u>                                 |                             | <u>5</u>                                |                  | b               | 100              |                            | OR                            | <u>a</u> ∞                   |                                  |  |
|  | Fee (37 CFR 1:16                         | <del> </del>                |   |                  |                 |                  |                            |                               |                              |                                  |  |
| FIRST PRESENT  | TION OF MULTIPLE                         | DEPENDENT CL                | AIM (37 OF                              | R 1.16(D)        |                 | 80               | ·                          | 00-                           | 360                          |                                  |  |
|  |  |                             |   |                  | T A             | OTAL .<br>DOLFEE |                            | OR OR                         | TOTAL<br>ADD'L FEE           | •                                |  |
| • If the entry in co   | umn 1 is less than                       | the entry in col            | umn 2, wille                            | "O" in column 3. |                 | 1                |                            |                               | L                            |                                  |  |
| HIDE HIDDESIN  | umber Previously F<br>Imber Previously P | ノがん ドット がい だい               | IC COACE I                              |                  |                 | 20-              |                            |                               |                              |                                  |  |

The "Highest Number Previously Paid For (Lotal or modependent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1, 16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTOL Tithe Will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, about the sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS. ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you, need assistance in completing the form, call 1-800-PTO-9199 and select option 2.